



**Massachusetts Department of Environmental Protection**  
**Bureau of Air & Waste**  
**Underground Storage Tank (UST) Program**  
**UST/TPI - Third-Party Inspector Certification/Renewal**

**Important:** When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



<b>Type of Application:</b>	<input type="checkbox"/> <b>New Certification</b> – Complete Sections A, B & D	<input type="checkbox"/> <b>Renewal</b> – Complete Sections A, C & D
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**A. Contact Information** – Please type or print.

First Name	Last Name	
Address 1		
Address 2		
City/Town	State	Zip Code
Email Address (Required)	Telephone Number	

**B. Initial Certification: Third-Party Inspector (TPI) Qualifications** - 310 CMR 80.49(4)

1. I hold a MassDEP TPI certification issued before January 2, 2015.  
☐ Yes – Provide Current MassDEP TPI Number & Continue to 2.   ☐ No – Skip to 3.                        Current MassDEP TPI Registration Number
2. I have performed at least ten (10) third-party inspections of UST systems in Massachusetts since August 8, 2007.  
☐ Yes – Skip to 5.   ☐ No – Stop and apply only after you have completed ten (10) third-party inspections.
3. Document your expertise in the field of UST installation or operation/maintenance by checking the appropriate box below. Attach a resume that details your pertinent work experience and document your educational experience, if applicable.  
☐ I have at least five (5) years of work experience **or**  
☐ I have at least three (3) years of work experience **and** a bachelor's or associate's degree in science or engineering
4. Document your hands-on UST system inspection experience by checking the appropriate box(es) below and attaching letters, including relevant state TPI certification numbers, to document the experience you claim  
☐ I have assisted a qualified TPI with at least ten (10) UST inspections over the last three (3) years.  
☐ I hold a TPI certification from another state and have completed at least ten (10) UST inspections within the last three (3) years.
5. Document that you have taken and passed all required certification examinations by checking the boxes below and attaching the appropriate documentation (i.e. Massachusetts and International Code Council (ICC) certifications).  
☐ MassDEP Class A/B Operator *Reciprocal Exam* – Must have been taken on or after January 21, 2015.  
☐ ICC UST Installation & Retrofitting Exam (#U1)      ☐ ICC UST Decommissioning Exam (#U2)  
☐ ICC UST Tank Tightness Exam (#U3)      ☐ ICC UST Cathodic Protection Exam (#U4)

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**C. Renewal: Annual Training Requirements – 310 CMR 80.49(4)**

To renew your TPI certification, you must apply at least 90 days before the current certification expires and complete the training log below.

\_\_\_\_\_  
MassDEP Third-Party Inspector (TPI) Certification Number

\_\_\_\_\_  
TPI Certification Date (MM/DD/YYYY)

**Training Attended:**

Year 1

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Location

Year 2

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Location

Year 3

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Location

Year 4

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Location

Year 5

\_\_\_\_\_  
Date (MM/DD/YYYY)

\_\_\_\_\_  
Location

**D. Signature Statement**

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including possible fines and imprisonment."

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date (MM/DD/YYYY)

**Submit a scan of this completed and signed form to: [dep.ust@state.ma.us](mailto:dep.ust@state.ma.us)**